

Patent Attorney's Docket No. <u>032674-145</u>

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

UTILITY PATENT APPLICATION TRANSMITTAL LETTER

Box PATENT APPLICATION

Assistant Commissioner for Patents Washington, D.C. 20231

Sir:

Enclosed for filing is the utility patent application of <u>Robert L. CHAMBERLAIN</u> for <u>Methods and Apparatus for Feature Recognition Time Shift Correlation</u>.

- [] Applicant(s) hereby request(s) that the above-captioned application NOT BE
 PUBLISHED under 35 U.S.C. § 122(b) and 37 C.F.R. § 1.211. The undersigned hereby certifies that the invention disclosed in this application has not and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at eighteen months after filing.
- [] Applicant(s) suggest(s) Figure _ for inclusion on the front page of the patent application publication and patent.

Also enclosed are:

- [X] <u>21</u> sheet(s) of [X] formal [] informal drawing(s);
- [X] an Assignment document;
- [] an Information Disclosure Statement; and
- [] Other: _.
- [X] An [X] executed [] unexecuted declaration of the inventor(s)[X] also is enclosed [] will follow.

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Date of Deposit OLLI POOD

I hereby certify that this paper or fee is the ng deposited with the United States Posta Service "Express Mail Post Office to Addressee" service under 37 OFS 1 10 on the dail indicated above

under 87 0HK 1 10 on the dail indicated above and is addressed to the Gommissioner of Patents and Tysonmarks Mashir gron IDIO 20231.

(Type or or of the name of person maling paper

(Signature of person realing paper or ree)





The filing fee has been calculated as follows [] and in accordance with the enclosed preliminary amendment:

| | | CLAIM | S | | |
|--|------------------|------------|-----------------|-------------------|-----------|
| | NO. OF CLAIMS | | EXTRA CLAIMS | RATE | FEE |
| Basic Application Fee (101) | | | | | \$ 740.00 |
| Total Claims | 30 | MINUS 20 = | 10 | x \$18 = (103) | \$180.00 |
| Independent Claims | 3 | MINUS 3 = | 0 | x \$84 = (102) | .00 |
| If multiple dependent claims are presented, add \$280.00 (104) | | | | | .00 |
| Total Application Fee | | | | | \$920.00 |
| If claiming small entity status, subtract 50% of Total Application Fee | | | | | .00 |
| Add Assignment Recording Fee of \$40.00 (581) if Assignment document is enclosed | | | | | \$40.00 |
| TOTAL APPLICATION FEE DUE | | | | | \$960.00 |

| [] | This application is being filed without a filing fee. Issuance of a Notice to File | | | | | |
|----|--|--|--|--|--|--|
| | Missing Parts of Application is respectfully requested. | | | | | |

- [] A check in the amount of \$____ is enclosed for the fee due.
- [X] Charge \$ 960.00 to Deposit Account No. 02-4800 for the fee due.
- [X] The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Please address all correspondence concerning the present application to:

Michael G. Savage

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

P.O. Box 1404

Alexandria, Virginia 22313-1404.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

P.O. Box 1404 Alexandria, Virginia 22313-1404 (919) 941-9240

Stephen J. Tyty

Registration 46. 45,846

Date: January 11, 2002